

**CHAPTER 13 PLAN
UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF MISSISSIPPI**

Debtor: Robert G. Crowder SSN: XXX-XX-1401
Joint Debtor: Betty M. Crowder SSN: XXX-XX-7042
Address: 2192 Colonial Hills Drive
Southaven, MS 38671

CASE NO. 15-11567-JDW
Median Income: Above Below

THIS PLAN DOES NOT ALLOW CLAIMS. Creditors must file a proof of claim to be paid under any plan that may be confirmed. **The treatment of ALL secured and priority debts must be provided for in this plan.**

PAYMENT AND LENGTH OF PLAN

The plan period shall be for a period of 60 months, not to be less than 36 months for below median income debtor(s), or less than 60 months for above median income debtor(s).

- (A) Debtor shall pay \$ 1,251.11 (monthly, semi-monthly, weekly, or bi-weekly) to the chapter 13 trustee. Unless otherwise ordered by the Court, an Order directing payment shall be issued to Debtor's employer at the following address:

Direct

- (B) Joint Debtor shall pay \$ 1,251.11 (monthly, semi-monthly, weekly, or bi-weekly) to the chapter 13 trustee. Unless otherwise ordered by the Court, an Order directing payment shall be issued to Debtor's employer at the following address:

Direct

PRIORITY CREDITORS.

Filed claims which are not disallowed are to be paid in full or as ordered by the Court as follows:

Internal Revenue Service: \$ 0.00 at \$ 0.00 /month

Mississippi Dept. of Revenue: 2008 \$ 18,732.87 at \$ 416.70 /month

Other/MS Dept. of Revenue 2009: \$ 3,622.34 at \$ 80.58 /month

MS Dept. of Revenue 2013 \$ 126.00 at \$ 2.80

DOMESTIC SUPPORT OBLIGATION. DUE TO:

POST PETITION OBLIGATION: In the amount of \$ _____ per month beginning _____.

To be paid direct, through payroll deduction, or through the plan.

PRE-PETITION ARREARAGE: In the total amount of \$ _____ through _____ which shall be paid in

the amount of \$ _____ per month beginning _____.

To be paid Direct, through payroll deduction, or through the plan.

HOME MORTGAGES. All claims secured by real property which are to be paid through the plan shall be scheduled below. Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed herein, subject to the start date for the continuing monthly mortgage payment proposed herein.

Mtg pmts to GreenTree Servicing Beginning July 1, 2015 @ \$ 668.00 Plan Direct
Mtg pmts to _____ Beginning _____ @ \$ _____ Plan Direct
Mtg pmts to _____ Beginning _____ @ \$ _____ Plan Direct

Mtg arrears to GreenTree Servicing Through June 30, 2015 \$ 2,672.00 @ \$ 44.53 /mo
Mtg arrears to _____ Through _____ \$ _____ @ \$ _____ /mo
Mtg arrears to _____ Through _____ \$ _____ @ \$ _____ /mo

Debtor's Initials _____

Joint Debtor's Initials _____

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MORTGAGE CLAIMS TO BE PAID IN FULL OVER PLAN TERM:

Creditor: _____ Approx. amt. due: _____ Int. Rate: _____
Property Address: _____ Are related taxes and/or insurance escrowed Yes No

Creditor: _____ Approx. amt. due: _____ Int. Rate: _____
Property Address: _____ Are related taxes and/or insurance escrowed Yes No

NON-MORTGAGE SECURED CLAIMS. Creditors that have filed claims that are not disallowed are to retain lien(s) pursuant to 11 U.S.C. § 1325(a)(5)(B)(i)(I) until the payment of the debt determined as under non-bankruptcy law or discharge. Such creditors shall be paid as secured claimants the sum set out below or pursuant to other order of the Court. The portion of the claim not paid as secured shall be treated as a general unsecured claim.

<u>CREDITOR'S NAME</u>	<u>COLLATERAL</u>	<u>910*</u> <u>CLM</u>	<u>APPROX. AMT. OWED</u>	<u>VALUE</u>	<u>INT. RATE</u>	<u>PAY VALUE OR AMT. OWED</u>
TD Auto Finacne	2012 Jeep Patriot	✓	\$27,304.14	\$16,025.00	5%	AMT. OWED
Wells Fargo	2010 Dodge Ram	✓	\$25,584.66	\$22,262.00	4.29	AMT. OWED
Capital One/ Yamaha	2009 Yamaha Scooter		\$893.01	\$1,450.00	5%	AMT. OWED

* The column for "910 CLM" applies to both motor vehicles and "any other thing of value" as used in the "hanging paragraph" of 11 U.S.C. § 1325

SPECIAL CLAIMANTS including, but not limited to, co-signed debts, abandonment of collateral, direct payments by Debtor, etc. For all abandoned collateral Debtor will pay \$0.00 on the secured portion of the debt. Where the proposal is for payment, creditor must file a proof of claim to receive proposed payment.

<u>CREDITOR'S NAME</u>	<u>COLLATERAL</u>	<u>APPROX. AMT. OWED</u>	<u>PROPOSED TREATMENT</u>
Tower Loan of Horn Lake	2006 HiLo Camper	\$4,030.00	Amount owed at 5% interest over the life time of the plan
Tower Loan of Horn Lake	Refrigerator	\$1,000.00	The value at 5% interest over the life time of the plan

STUDENT LOANS which are not subject to discharge pursuant to 11 U.S.C. §§ 523(a)(8) and 1328(c) are as follows (such debts shall not be included in the general unsecured total):

<u>CREDITOR'S NAME</u>	<u>APPROX. AMT. OWED</u>	<u>CONTRACTUAL MO. PMT.</u>	<u>PROPOSED TREATMENT</u>

SPECIAL PROVISIONS which may apply to any or all payments to be paid through the plan, including, but not limited to, adequate protection payments:

GENERAL UNSECURED CLAIMS total approximately \$ 15,618.45 . Such claims must be **timely filed** and not disallowed to receive payment as follows: IN FULL (100%), 0 % (percent) MINIMUM, or a total distribution of \$, with the Trustee to determine the percentage distribution. **Those general unsecured claims not timely filed shall be paid nothing, absent order of the Court.**

Debtor's Initials _____

Joint Debtor's Initials _____

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Total attorney fee charged: \$ 3,200.00
Attorney fee previously paid: \$ 700.00
Attorney fee to be paid in plan: \$ 2,500.00

The payment of administrative costs and aforementioned attorney fees are to be paid pursuant to Court order and/or local rules.

Automobile Insurance Co/Agent
BARRY BOUCHARD STATE FARM
40 STATELINE RD W.
SOUTHAVEN, MS 38671
662 393 8000
Telephone/Fax: 662 393 0016

DATED: 05/14/2015 DEBTOR'S SIGNATURE

JOINT DEBTOR'S SIGNATURE

ATTORNEY'S SIGNATURE

Attorney for Debtor (Name/Address/Phone/Email)

Susan C. Smith
PO Box 1251
Greenville, MS 38702

Telephone No. 662-378-2558

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Robert L. Crowder
Betty M. Crowder
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